| Only |
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| Software |
| Forms |
| • |
| [1-800-998-2424] |
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| Z-Filing, |

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|--|--|
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| B22A (Official Form 22A) (Chapter 7) (01/08) | According to the calculations required by this statement: |
| | ☐ The presumption arises |
| In re: Burns, Paul G & Burns, Darlene Debtor(s) | ▼ The presumption does not arise |
| Case Number: | (Check the box as directed in Parts I, III, and VI of this statement.) |
| (If known) | |

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| | Part I. EXCLUSION FOR DISABLED VI | ETERANS AND NON-CONSUM | ER DEBTOR | S | | | | |
|----|---|---|--------------------|--------------------|--|--|--|--|
| 1A | If you are a disabled veteran described in the Veteran's Veteran's Declaration, (2) check the box for "The pres the verification in Part VIII. Do not complete any of the | umption does not arise" at the top of th | | | | | | |
| | □ Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)). | | | | | | | |
| 1B | If your debts are not primarily consumer debts, check to complete any of the remaining parts of this statement. | If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. | | | | | | |
| | ☐ Declaration of non-consumer debts. By checking | this box, I declare that my debts are no | t primarily const | ımer debts. | | | | |
| | Part II. CALCULATION OF MONTH | LY INCOME FOR § 707(b)(7) E | XCLUSION | | | | | |
| | Marital/filing status. Check the box that applies and c | complete the balance of this part of this | statement as dir | ected. | | | | |
| | a. Unmarried. Complete only Column A ("Debtor | | | | | | | |
| | b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11. | | | | | | | |
| 2 | c. Married, not filing jointly, without the declaration Column A ("Debtor's Income") and Column I | | e 2.b above. Cor | nplete both | | | | |
| | d. Married, filing jointly. Complete both Column Lines 3-11. | A ("Debtor's Income") and Column | B ("Spouse's In | ncome") for | | | | |
| | All figures must reflect average monthly income receiv | | Column A | Column B | | | | |
| | the six calendar months prior to filing the bankruptcy c month before the filing. If the amount of monthly incor must divide the six-month total by six, and enter the res | ne varied during the six months, you | Debtor's Income | Spouse's Income | | | | |
| 3 | Gross wages, salary, tips, bonuses, overtime, commi | issions. | \$ | \$ 5,128.20 | | | | |
| 4 | Income from the operation of a business, profession a and enter the difference in the appropriate column(s) one business, profession or farm, enter aggregate number attachment. Do not enter a number less than zero. Do not expenses entered on Line b as a deduction in Part V | of Line 4. If you operate more than pers and provide details on an not include any part of the business | | | | | | |
| | a. Gross receipts | \$ | | | | | | |
| | b. Ordinary and necessary business expenses | \$ | | | | | | |
| | c. Business income | Subtract Line b from Line a | \$ | \$ | | | | |

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| | | , , - , , , , , | | | | | | | |
|--|--|---|---|---|--------------------------------------|----------------------------|----------------|----|-----------|
| | diffe | t and other real property income. rence in the appropriate column(s) include any part of the operating | of Line 5. Do n | ot enter a n | umber less | s than zero. Do | | | |
| 5 | a. | Gross receipts | | \$ | | | | | |
| | b. | Ordinary and necessary operating | expenses | \$ | | | | | |
| | c. | Rent and other real property inco | me | Subtract I | Line b from | n Line a | \$ | \$ | |
| 6 | Inte | rest, dividends, and royalties. | | | | | \$ | \$ | |
| 7 | Pens | sion and retirement income. | | | | | \$ | \$ | |
| Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. | | | | | | | | \$ | |
| 9 | How was | mployment compensation. Enter the vever, if you contend that unemploys a benefit under the Social Security arms A or B, but instead state the am | ment compensa Act, do not list | tion receive the amount | ed by you | or your spouse | 1 | | |
| | cla | employment compensation imed to be a benefit under the cial Security Act | Debtor \$ | | Spouse \$ | 5 | \$ | \$ | |
| 10 | source paid alim Secu a vice a. b. | me from all other sources. Specifices on a separate page. Do not include by your spouse if Column B is component or separate maintenance. Do not active the control of the | ude alimony or ompleted, but inot include any victim of a war | r separate i nclude all o y benefits re | maintenai other pay eceived un | ments of der the Social | \$ | \$ | |
| 11 | Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s). | | | | | | | \$ | 5,128.20 |
| 12 | Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A. | | | | | | | | 5,128.20 |
| | | Part III. AP | PLICATION | N OF § 70 | 7(B)(7) E | XCLUSION | | | |
| 13 | | ualized Current Monthly Income nd enter the result. | for § 707(b)(7 |). Multiply | the amour | nt from Line 12 | by the number | \$ | 61,538.40 |
| 14 | hous | licable median family income. Entehold size. (This information is available and court.) | | | | | | | |
| | a. Er | nter debtor's state of residence: Illin | ois | | _ b. Enter | debtor's house | hold size: _3_ | \$ | 66,189.00 |
| | | lication of Section707(b)(7). Chec | | - | | | | | |
| 15 | The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII. ☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement. | | | | | | | | |

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| D44A (| OHICIA. | Part IV. CALCULATI | | ENT | MONTHLY | INCOME FO | OR § 707(b)(2) | |
|--|---|--|---|---|---|--|--|----|
| 16 | Enter | the amount from Line 12. | | | | | | \$ |
| 17 | Line 1 debtor payme debtor | al adjustment. If you checked 1, Column B that was NOT part's dependents. Specify in the literat of the spouse's tax liability it's dependents) and the amount ments on a separate page. If you | id on a regular batines below the batter or the spouse's state of income devote | asis for sis for upport ed to e | the household excluding the of persons oth ach purpose. I | d expenses of the Column B incomer than the debte of necessary, list zero. | e debtor or the me (such as or or the additional | \$ |
| 18 | Curre | ent monthly income for § 707 | (b)(2). Subtract I | Line 17 | from Line 16 | and enter the re | sult. | \$ |
| Part V. CALCULATION OF DEDUCTIONS FROM INCOME Subpart A: Deductions under Standards of the Internal Revenue Service (IRS) | | | | | | | | |
| 19A | National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | | \$ | |
| 19B | National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. | | | | | | | |
| | Household members under 65 years of age Household members 65 years of age or older | | | | | | | |
| | a1. | Allowance per member | | a2. | Allowance p | per member | | |
| | b1. | Number of members | | b2. | Number of 1 | members | | |
| | c1. | Subtotal | | c2. | Subtotal | | | \$ |
| 20A | and U | Standards: housing and utilitilities Standards; non-mortgagnation is available at www.usdo | ge expenses for th | e appli | cable county a | and household si | | \$ |
| 20B | the IR inform the tot subtra a. b. | Standards: housing and utilities Standards and Utilities Standards and Utilities Standards and Itilities Standards of the Average Monthly Payord Line b from Line a and enter IRS Housing and Utilities Standards Monthly Payment for any, as stated in Line 42 Net mortgage/rental expense | ards; mortgage/rei pj.gov/ust/ or fror yments for any de r the result in Lin ndards; mortgage | nt expe in the cl bts sec e 20B. | nse for your c lerk of the bar ured by your l Do not enter expense | ounty and family akruptcy court); nome, as stated i | y size (this enter on Line b in Line 42; than zero. | \$ |

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| 21 | Local Standards: housing and utilities; adjustment. If you contend that and 20B does not accurately compute the allowance to which you are entit Utilities Standards, enter any additional amount to which you contend you for your contention in the space below: | led under the IRS Housing and | \$ | | | | | |
|-----|--|-------------------------------|----|--|--|--|--|--|
| | Local Standards: transportation; vehicle operation/public transportation an expense allowance in this category regardless of whether you pay the example and regardless of whether you use public transportation. | | | | | | | |
| | Check the number of vehicles for which you pay the operating expenses or expenses are included as a contribution to your household expenses in Line | | | | | | | |
| 22A | $\square 0 \square 1 \square 2$ or more. | | | | | | | |
| | If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | | | |
| 22B | Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | | | |
| | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) | | | | | | | |
| | ☐ 1 ☐ 2 or more. | | | | | | | |
| 23 | Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero. | | | | | | | |
| | a. IRS Transportation Standards, Ownership Costs | \$ | | | | | | |
| | Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 42 | \$ | | | | | | |
| | c. Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a | \$ | | | | | |
| 24 | Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. | | | | | | | |
| | a. IRS Transportation Standards, Ownership Costs, Second Car | \$ | | | | | | |
| | Average Monthly Payment for any debts secured by Vehicle 2, as b. stated in Line 42 | \$ | | | | | | |
| | c. Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a | \$ | | | | | |

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| BZZA (| Official Form 22A) (Chapter 7) (01/08) | | | | | |
|---|--|--|----|--|--|--|
| 25 | Other Necessary Expenses: taxes. Enter the total average month federal, state, and local taxes, other than real estate and sales taxe taxes, social security taxes, and Medicare taxes. Do not include the security taxes are taxes. | s, such as income taxes, self employment | \$ | | | |
| 26 | Other Necessary Expenses: involuntary deductions for employment payroll deductions that are required for your employment, such as and uniform costs. Do not include discretionary amounts, such | s retirement contributions, union dues, | \$ | | | |
| 27 | Other Necessary Expenses: life insurance. Enter total average of for term life insurance for yourself. Do not include premiums for whole life or for any other form of insurance. | | \$ | | | |
| 28 | Other Necessary Expenses: court-ordered payments. Enter the required to pay pursuant to the order of a court or administrative a payments. Do not include payments on past due obligations in | agency, such as spousal or child support | \$ | | | |
| Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. | | | | | | |
| 30 | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. | | | | | |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. | | | | | |
| Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service— such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. | | | | | | |
| 33 | \$ | | | | | |
| | Subpart B: Additional Expense Ded Note: Do not include any expenses that y | | | | | |
| 34 | Health Insurance, Disability Insurance, and Health Savings A expenses in the categories set out in lines a-c below that are reaso spouse, or your dependents. a. Health Insurance b. Disability Insurance c. Health Savings Account | | | | | |
| Total and enter on Line 34 If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$ | | | | | | |
| Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. | | | | | | |
| 36 | Protection against family violence. Enter the total average reasonably necessary monthly expenses that | | | | | |

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| 37 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. | | | | | | \$ | | |
|----|--|--|---|---|--|---|----|--|--|
| 38 | you a secon trust | cation expenses for dependent of actually incur, not to exceed \$137 and ary school by your dependent of the with documentation of your asonable and necessary and not the second school in the second | 7.50 per cl children le actual ex | nild, for attendance at a ss than 18 years of age penses, and you must | private or public You must provit explain why the | elementary or de your case | \$ | | |
| 39 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | | | | | | | | |
| 40 | | tinued charitable contributions or financial instruments to a char | | | | | \$ | | |
| 41 | Tota | l Additional Expense Deduction | ns under | $\S 707(b)$. Enter the total | al of Lines 34 thro | ugh 40 | \$ | | |
| | Subpart C: Deductions for Debt Payment | | | | | | | | |
| 42 | you o Payn the to follo | own, list the name of the creditor, nent, and check whether the payn otal of all amounts scheduled as c wing the filing of the bankruptcy | Ints on secured claims. For each of your debts that is secured by an interest in property that he name of the creditor, identify the property securing the debt, state the Average Monthly check whether the payment includes taxes or insurance. The Average Monthly Payment is amounts scheduled as contractually due to each Secured Creditor in the 60 months aling of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate total of the Average Monthly Payments on Line 42. Average | | | | | | |
| 43 | resid you i credi cure forec | er payments on secured claims. ence, a motor vehicle, or other properties of the payments of t | coperty ne 60th of an sted in Lii in default | cessary for your suppoy amount (the "cure and 42, in order to maint that must be paid in or | rt or the support on nount") that you main possession of der to avoid repossessary, list additionally and the Debt | f your dependents, nust pay the the property. The session or | \$ | | |
| 44 | Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, | | | | | | | | |

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| B22A (| Official Form 22A) (Chapter 7) (01/08) | | | | | | | | |
|--|--|---|--|--|--|--|--|--|--|
| | Chapter 13 administrative expenses. If you are eligible to file a case un following chart, multiply the amount in line a by the amount in line b, and administrative expense. | | | | | | | | |
| | a. Projected average monthly chapter 13 plan payment. \$ | | | | | | | | |
| 45 | b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | | | | |
| | c. Average monthly administrative expense of chapter 13 Total and | al: Multiply Lines a b \$ | | | | | | | |
| 46 | Total Deductions for Debt Payment. Enter the total of Lines 42 through 45. | | | | | | | | |
| | Subpart D: Total Deductions from | Income | | | | | | | |
| 47 | 47 Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46. | | | | | | | | |
| | Part VI. DETERMINATION OF § 707(b)(2 | 2) PRESUMPTION | | | | | | | |
| 48 Enter the amount from Line 18 (Current monthly income for § 707(b)(2)) \$ | | | | | | | | | |
| 49 Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) | | | | | | | | | |
| 50 Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result. | | | | | | | | | |
| 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | | | | | | | | | |
| | Initial presumption determination. Check the applicable box and proceed as directed. | | | | | | | | |
| The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. | | | | | | | | | |
| 52 | The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. | | | | | | | | |
| | The amount on Line 51 is at least \$6,575, but not more than \$10,9 though 55). | 950. Complete the remainder of Part VI (Lines 53 | | | | | | | |
| 53 | 53 Enter the amount of your total non-priority unsecured debt | | | | | | | | |
| 54 | Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. | | | | | | | | |
| | Secondary presumption determination. Check the applicable box and p | proceed as directed. | | | | | | | |
| 55 | The amount on Line 51 is less than the amount on Line 54. Check the top of page 1 of this statement, and complete the verification in Page 1. | | | | | | | | |
| | The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VIII. | | | | | | | | |

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Part VII. ADDITIONAL EXPENSE CLAIMS

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

| | Expense Description | Monthly Amount |
|----|-----------------------------|----------------|
| a. | | \$ |
| b. | | \$ |
| c. | | \$ |
| | Total: Add Lines a, b and c | \$ |

Part VIII. VERIFICATION

I declare under penalty of perjury that the information provided in this statement is true and correct. (*If this a joint case, both debtors must sign.*)

57

56

Date: January 27, 2009 Signature: /s/ Paul G Burns

(Debtor)

Date: January 27, 2009 Signature: /s/ Darlene Burns

(Joint Debtor, if any)

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|--|---|-----------------------------------|--------------------|--|--|-------|----------------------------------|-------------------------|---|---------------------------------|--------------|----------|----------------------------------|---|
| | | | | es Ba | ankruptcy trict of Illi | Co | ourt | | | | Vol | lunt | ary Petition | |
| Name of Debtor (if Burns, Paul G | individual, en | ter Last, First | , Middle | e): | | | Name of Jo Burns, I | | | use) (Last, First, | , Middle): | | | |
| All Other Names us (include married, married, married) | • | | 8 years | | | | | | - | ne Joint Debtor ind trade names | | 8 years | 1 | |
| Last four digits of S EIN (if more than or | | | ayer I.D | . (ITIN) |) No./Complete | | | U | | or Individual-T | Taxpayer I. | D. (IT | IN) No./Complete | |
| Street Address of Do 2400 N. Samso Waukegan, IL | | • | tate & Z | Zip Code | e): | | Street Add 2400 N. Waukeg | Samso | | tor (No. & Stree ay #2c | et, City, St | tate & Z | Zip Code): | |
| Waukegaii, iL | | | 7 | ZIPCOD | E 60087 | | waukeg | aii, iL | | | | ZIPC | ODE 60087 | |
| County of Residence Lake | e or of the Pri | ncipal Place o | of Busin | ess: | | | County of Lake | Residence | e or of t | he Principal Pla | ice of Busi | iness: | | |
| Mailing Address of | Debtor (if dif | ferent from st | reet add | ress) | | | Mailing Ad | ddress of | Joint D | ebtor (if differer | nt from str | eet ado | lress): | |
| | | | | ZIPCOD | DE | | İ | | | | | ZIPC | ODE | _ |
| Location of Principa | al Assets of B | usiness Debto | r (if diff | erent fr | om street addres | s abo | ove): | | | | ı | | | _ |
| | | | | | | | | | | | | ZIPC | ODE | _ |
| (Forr | ype of Debto n of Organiza | tion) | | | Nature (Check | | | | | the Petitio | | | Under Which k one box.) | |
| (Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.) ☐ Health Care Business ☐ U.S.C. § 101(51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank ☐ Other | | | Estate | e as defined i | n 11 | | | | on of a Foreign ceeding 5 Petition for on of a Foreign Proceeding | – | | | | |
| (Check box, if a ☐ Debtor is a tax-exempt Title 26 of the United S Internal Revenue Code) | | | , if agmpt of ed S | t organization under states Code (the individual primarily for a personal, family, or house- | | | | | | | | | | |
| attach signed app | Lifiling Fee attached In gree to be paid in installments (Applicable to individuals only). Must ch signed application for the court's consideration certifying that the debtor nable to pay fee except in installments. Rule 1006(b). See Official Form Check one box: Debtor is a small business debtor as Check if: Debtor's aggregate noncontingent liquity. | | | | | | iness debtor as ontingent liquid | ned in 11 defined in | 11 U.S | S.C. § 101(51D). | | | | |
| Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | | | | | Check all applicable boxes: A plan is being filed with this petition Acceptances of the plan were solicited prepetition from one or more classe creditors, in accordance with 11 U.S.C. § 1126(b). | | | | | ne or more classes | of | | | |
| Statistical/Admini Debtor estimate Debtor estimate distribution to u | s that funds w s that, after ar | vill be availabl ny exempt pro | | | | | | id, there v | will be r | no funds availab | le for | | HIS SPACE IS FO COURT USE ONL | |
| Estimated Number o | f Creditors | | | | | _ | | _ | | | | | | |
| 1-49 50-99 | 100-199 | 200-999 | 1,000- 5,000 | | 5,001- 10,000 | | 001- 000 | 25,001- 50,000 | | 50,001- 100,000 | Over 100,000 | | | |
| \$50,000 \$100,000 | \$500,000 | \$500,001 to \$1 million | \$1,000 \$10 m | | \$10,000,001 to \$50 million | | 0,000,001 to 00 million | \$100,00 to \$500 | | \$500,000,001 to \$1 billion | More tha | | | |
| Estimated Liabilities | | | | | | | | | | | | | | |

| Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution | Solution

| Location Where Filed: None | Case Number: | Date Filed: |
|--|---|--|
| Location Where Filed: | Case Number: | Date Filed: |
| Pending Bankruptcy Case Filed by any Spouse, Partner or | Affiliate of this Debtor (If n | nore than one, attach additional sheet) |
| Name of Debtor: None | Case Number: | Date Filed: |
| District: | Relationship: | Judge: |
| Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition. | (To be complete whose debts are I, the attorney for the petitione that I have informed the petitic chapter 7, 11, 12, or 13 of explained the relief available that I delivered to the debtor Bankruptcy Code. | Exhibit B Indicate the desired of the desired of the foregoing petition, declar oner that [he or she] may proceed under title 11, United States Code, and have under each such chapter. I further certification the notice required by § 342(b) of the desired of the desired of the foregoing petition, declar oner that [he or she] may proceed under title 11, United States Code, and have under each such chapter. I further certification the notice required by § 342(b) of the desired of the desired of the foregoing the foregoing the foregoing the foregoing the foregoing the foregoing petition, declar oner that [he or she] may proceed under the foregoing petition, declar oner that [he or she] may proceed under the foregoing petition, declar oner that [he or she] may proceed under the foregoing petition, declar oner that [he or she] may proceed under the foregoing petition and the foregoing petition and the foregoing petition and the foregoing petition and the foregoing petition are the foregoing petition and the foregoing petition and the foregoing petition are the foregoing petition are the foregoing petition and the foregoing petition are the foregoing petition are the foregoing petition are the foregoing petition are the foregoing petition and the foregoing petition are the fo |
| | X /s/ Paul R. Idlas Signature of Attorney for Debtor(s | 1/27/09 Date |
| (To be completed by every individual debtor. If a joint petition is filed, ea ✓ Exhibit D completed and signed by the debtor is attached and ma If this is a joint petition: | de a part of this petition. | |
| Exhibit D also completed and signed by the joint debtor is attach | ed a made a part of this petition. | |
| (Check any approach of the content | days than in any other District. partner, or partnership pending i ace of business or principal asse but is a defendant in an action or | n this District. ts in the United States in this District, proceeding [in a federal or state court] |
| in this District, or the interests of the parties will be served in reg Certification by a Debtor Who Reside | - | |
| (Check all app Landlord has a judgment against the debtor for possession of deb | | I Property |
| | | • • |
| | | • • |

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
 Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Case 09-02339 B1 (Official Form 1) (1/08)

filing of the petition.

(This page must be completed and filed in every case)

Voluntary Petition

Doc 1

Filed 01/27/09

Document

Entered 01/27/09 11:55:49

Burns, Paul G & Burns, Darlene

Page 10 of 43

Name of Debtor(s):

Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet)

Desc Main

Page 2

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Burns, Paul G & Burns, Darlene

Signatures

$Signature(s) \ of \ Debtor(s) \ (Individual/Joint)$

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Paul G Burns

Signature of Debtor

Paul G Burns

/ /s/ Darlene Burns

Signature of Joint Debtor

Darlene Burns

Telephone Number (If not represented by attorney)

January 27, 2009

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Dat

Signature of Attorney*

X /s/ Paul R. Idlas

Signature of Attorney for Debtor(s)

Paul R. Idlas Law Office of Paul R. Idlas 1099 N. Corporate Cir. Grayslake, IL 60030

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

January 27, 2009

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

X

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Case 09-02339 B1D (Official Form 1, Exhibit D) (12/08)

Doc 1

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Desc Main

Document Page 12 of 43 United States Bankruptcy Court

Northern District of Illinois

| IN RE: | Case No |
|---|---|
| Burns, Paul G | Chapter 7 |
| Debtor(s) | |
| | R'S STATEMENT OF COMPLIANCE ELING REQUIREMENT |
| do so, you are not eligible to file a bankruptcy case, and the cou whatever filing fee you paid, and your creditors will be able to | tatements regarding credit counseling listed below. If you cannot art can dismiss any case you do file. If that happens, you will lose resume collection activities against you. If your case is dismissed to pay a second filing fee and you may have to take extra steps |
| Every individual debtor must file this Exhibit D. If a joint petition is one of the five statements below and attach any documents as direct | filed, each spouse must complete and file a separate Exhibit D. Check cted. |
| the United States trustee or bankruptcy administrator that outlined | se, I received a briefing from a credit counseling agency approved by the opportunities for available credit counseling and assisted me in the agency describing the services provided to me. Attach a copy of the agh the agency. |
| the United States trustee or bankruptcy administrator that outlined performing a related budget analysis, but I do not have a certificate to | se, I received a briefing from a credit counseling agency approved by the opportunities for available credit counseling and assisted me ir from the agency describing the services provided to me. You must file ided to you and a copy of any debt repayment plan developed through d. |
| | pproved agency but was unable to obtain the services during the five at circumstances merit a temporary waiver of the credit counseling gent circumstances here.] |
| you file your bankruptcy petition and promptly file a certificate of any debt management plan developed through the agency. Fa case. Any extension of the 30-day deadline can be granted only | btain the credit counseling briefing within the first 30 days after from the agency that provided the counseling, together with a copy ailure to fulfill these requirements may result in dismissal of your for cause and is limited to a maximum of 15 days. Your case may as for filing your bankruptcy case without first receiving a credit |
| 4. I am not required to receive a credit counseling briefing becaumotion for determination by the court.] | use of: [Check the applicable statement.] [Must be accompanied by a |
| • | by reason of mental illness or mental deficiency so as to be incapable nancial responsibilities.): |
| | y impaired to the extent of being unable, after reasonable effort, to |

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h)

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Paul G Burns

Date: January 27, 2009

does not apply in this district.

Case 09-02339 [B1D (Official Form 1, Exhibit D) (12/08)

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Document United States P

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Bankruptcy Court

United States Bankruptcy Court Northern District of Illinois

| IN RE: | | Case No. |
|----------------|-----------|-----------|
| Burns, Darlene | | Chapter 7 |
| | Debtor(s) | |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by

| the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in |
|---|
| performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the |
| certificate and a copy of any debt repayment plan developed through the agency. |
| 2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by |
| the United States twisted on healtwanter, administrator that entlined the amountarities for excellent and different and assisted making |

the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied to receive a credit counseling briefing because of: [Check the applicable statement.] | nied by a |
|---|------------|
| motion for determination by the court.] | |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be i of realizing and making rational decisions with respect to financial responsibilities.); | ncapable |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable participate in a credit counseling briefing in person, by telephone, or through the Internet.); | effort, to |
| Active military duty in a military combat zone. | |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. does not apply in this district. | § 109(h) |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | s/ Darlene Burns |
|----------------------|------------------|
| - | |

Date: **January 27, 2009**

 $_{B6\,Summary}$ (Form 6-Summary) (12)07) Doc 1

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Northern District of Illinois

Desc Main

| IN RE: | Case No |
|--------------------------------|-----------|
| Burns, Paul G & Burns, Darlene | Chapter 7 |
| Debtor(s) | * - |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NUMBER OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|---------------------|---------------|--------------|-------------|
| A - Real Property | Yes | 1 | \$ 0.00 | | |
| B - Personal Property | Yes | 3 | \$ 316,009.53 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | \$ 20,638.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 5 | | \$ 59,272.40 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | \$ 4,355.14 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 1 | | | \$ 4,298.00 |
| | TOTAL | 17 | \$ 316,009.53 | \$ 79,910.40 | |

Form 6 - Statistical Summary (12/07)

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| IN RE: | Case No |
|--------------------------------|-----------|
| Burns, Paul G & Burns, Darlene | Chapter 7 |
| Debtor(s) | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|------------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | \$ 4,355.14 |
|---|----------------|
| Average Expenses (from Schedule J, Line 18) | \$ 4,298.00 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C | |
| Line 20) | \$ 5,128.20 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 11,538.00 |
|--|---------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 59,272.40 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 70,810.40 |

| $_{ m B6A~(Official~Form,SA)}$ 09 $_{ m 0}$ 02339 Do | C | • |
|--|---|---|
|--|---|---|

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IN RE Burns, Paul G & Burns, Darlene

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Debtor(s)

Case No. _____(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--------------------------------------|--|---------------------------------------|--|----------------------------|
| None | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

TOTAL

0.00

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IN RE Burns, Paul G & Burns, Darlene

Case No.

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|-----|---|------------------|---|---------------------------------------|--|
| 1. | Cash on hand. | | Cash on hand | Н | 15.00 |
| | | | Cash on hand | W | 15.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Checking - First American Bank | J | 3.57 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | | Security deposits - landlord | J | 1,400.00 |
| 4. | Household goods and furnishings, include audio, video, and computer equipment. | | Household Goods - 2 TV's, DVD player, PC w/ printer, love seat, 2 recliners, other chairs, tables, lamps, 2 beds, dressers, vacuum cleaner, dishes, utensils, pots and pans, other misc. household goods. | Н | 1,500.00 |
| | | | Household Goods - 2 TV's, DVD player, PC w/ printer, love seat, 2 recliners, other chairs, tables, lamps, 2 beds, dressers, vacuum cleaner, dishes, utensils, pots and pans, other misc. household goods. | w | 1,500.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 6. | Wearing apparel. | | Wearing Apperal | Н | 400.00 |
| | | | Wearing Apperal | W | 400.00 |
| 7. | Furs and jewelry. | | Furs and Jewelry | W | 500.00 |
| | Firearms and sports, photographic, and other hobby equipment. | X | Town double box off | | 450,000,00 |
| 9. | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | Term death benefit Term death benefit | W | 150,000.00 100,000.00 |
| 10. | Annuities. Itemize and name each issue. | X | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |

Document

Debtor(s)

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(If known)

IN RE Burns, Paul G & Burns, Darlene

_ Case No. _

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | | | | JOINT, TY | CURRENT VALUE OF |
|-----|---|------------------|--------------------------------------|---------------------------------------|--|
| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
| 12. | Interests in IRA, ERISA, Keogh, or | | IRA - AIG | W | 12,500.00 |
| | other pension or profit sharing plans. Give particulars. | | IRA - CHS | W | 8,034.04 |
| | orre particulars. | | IRA - Met Life | W | 2,130.45 |
| | | | IRA - Prudential | W | 4,511.47 |
| | | | IRA - Valic | W | 24,000.00 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | Х | | | |
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments. | Х | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars. | Х | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | Х | | | |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | Х | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | Х | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | Х | | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and | | 2003 Dodge Intrepid | J | 4,410.00 |
| | other vehicles and accessories. | | 2004 Ford F150 pickup | J | 4,690.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| | | | | | |

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Debtor(s)

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IN RE Burns, Paul G & Burns, Darlene

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(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|--------------------------------------|---------------------------------------|--|
| 27. Aircraft and accessories. | Х | | | |
| 28. Office equipment, furnishings, and supplies. | Х | | | |
| 29. Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |
| | | | | |
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SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

Check if debtor claims a homestead exemption that exceeds \$136,875.

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| | | | CURRENT VALUE |
|---|--------------------------------------|-------------------------------|--|
| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
| SCHEDULE B - PERSONAL PROPERTY | | | |
| Cash on hand | 735 ILCS 5 §12-1001(b) | 15.00 | 15.00 |
| Cash on hand | 735 ILCS 5 §12-1001(b) | 15.00 | 15.00 |
| Checking - First American Bank | 735 ILCS 5 §12-1001(b) | 3.57 | 3.57 |
| Security deposits - landlord | 735 ILCS 5 §12-1001(b) | 1,400.00 | 1,400.00 |
| Household Goods - 2 TV's, DVD player, PC w/ printer, love seat, 2 recliners, other chairs, tables, lamps, 2 beds, dressers, vacuum cleaner, dishes, utensils, pots and pans, other misc. household goods. | 735 ILCS 5 §12-1001(b) | 1,500.00 | 1,500.00 |
| Household Goods - 2 TV's, DVD player, PC w/ printer, love seat, 2 recliners, other chairs, tables, lamps, 2 beds, dressers, vacuum cleaner, dishes, utensils, pots and pans, other misc. household goods. | 735 ILCS 5 §12-1001(b) | 1,500.00 | 1,500.00 |
| Wearing Apperal | 735 ILCS 5 §12-1001(a) | 400.00 | 400.00 |
| Wearing Apperal | 735 ILCS 5 §12-1001(a) | 400.00 | 400.00 |
| Furs and Jewelry | 735 ILCS 5 §12-1001(b) | 500.00 | 500.00 |
| | | | |

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IN RE Burns, Paul G & Burns, Darlene

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SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| ACCOUNT NO. 500002314999-5 | | J | 2004 Ford F150 pickup | T | T | | 10,000.00 | 5,310.00 |
| HSBC Po Box 17904 San Diego, CA 92177 | | | | | | | | |
| | | | VALUE \$ 4,690.00 | 1 | | | | |
| ACCOUNT NO. 502-3158081528-9001 | | J | 2003 Dodge Intrepid | | | | 10,638.00 | 6,228.00 |
| Wells Fargo Auto Finance PO Box 29704 Phonenix, AZ 85038-9704 | | | | | | | | |
| | | | VALUE \$ 4,410.00 | ╄ | | | | |
| ACCOUNT NO. | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | | T | T | | | |
| | | | VALUE \$ | | | | | |
| O continuation about4444 | - | | (T) () () | | otot | | \$ 20,638.00 | \$ 11,538.00 |
| 0 continuation sheets attached | | | (Total of t | | oage Tota | | \$ 20,638.00 | \$ 11,336.00 |
| | | | (Use only on l | | | | \$ 20,638.00 | \$ 11,538.00 |

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| liste | eport the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority d on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data. |
|----------------|---|
| $ \checkmark $ | Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TY | PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| | Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| | Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| | Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| | Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| | Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| | Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| | Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| | Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| | Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |
| | * Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment. |
| | 0 continuation sheets attached |

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(If known)

IN RE Burns, Paul G & Burns, Darlene

Debtor(s)

Case No. _

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | TINI TOTTIDATED | DISPUTED | | AMOUNT OF CLAIM |
|--|----------|---------------------------------------|--|--------------------|-------------------|----|-----------------------|
| ACCOUNT NO. 2005370836 | | J | | | | | |
| Access One 820 Jackson Blvd., 6th Floor Chicago, IL 60607 | | | | | | | 42.24 |
| ACCOUNT NO. 847 245 9505 249 1 | | J | | | | | 42.24 |
| AT&T PO Box 8100 Aurora, IL 60507 | | | | | | | 172.76 |
| ACCOUNT NO. 5148-8750-0003-5029 | | w | | | | | 112.10 |
| Barclays Bank Delaware 125 S West St Wilmington, DE 19801 | | | | | | | 7,687.90 |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | , |
| LHR Inc 56 Main St Hamburg, NY 14075 | | | Barclays Bank Delaware | | | | |
| A . c . c . l . c . l . l | | | Su | | | 6 | 7,902.90 |
| 4 continuation sheets attached | | | (Total of this (Use only on last page of the completed Schedule F. Report al the Summary of Schedules and, if applicable, on the Stati Summary of Certain Liabilities and Related I | To lso istic | otal on cal | \$ | 1,902.90 |
| | | | Summary of Certain Liabilities allu Kelaleu I | a۱ر | u.) | IΨ | |

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | ((| Continuation Sheet) | | | | |
|---|----------|---------------------------------------|---|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 4115-0726-2920-5082 | Х | J | | T | | Н | |
| Capital One P.O. Box 30285 Salt Lake City, UT 84130-0285 | | | | | | | 577.30 |
| ACCOUNT NO. | | | Assignee or other notification for: | + | | | 577.30 |
| Capital One P.O. Box 70886 Charlotte, NC 28272-9903 | | | Capital One | | | | |
| ACCOUNT NO. 5178-0523-2850-6767 | | J | 5291152133531356 | - | | Н | |
| Capital One P.O. Box 30281 Salt Lake City, UT 84130 | | | | | | | 6,054.00 |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | 0,004.00 |
| The Palmer Firm P.C. Po Box 1600 Rancho Cucamonga, CA 91729-1600 | | | Capital One | | | | |
| ACCOUNT NO. 5148-8750-0003-5029 | | J | | \vdash | | Н | |
| Chase P.O. Box 15298 Wilmington, DE 19850-5298 | | | | | | | 6,578.99 |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | 0,570.55 |
| The Palmer Firm P.C. Po Box 1600 Rancho Cucamonga, CA 91729-1600 | | | Chase | | | | |
| ACCOUNT NO. 601918039180396009686 | | J | | | | Н | |
| GE Money Bank P.O. Box 981127 El Paso, TX 79998-1127 | | | | | | | |
| Sheet no. 1 of 4 continuation sheets attached to | | | | Sub | tota | | 1,560.53 |
| Sheet no. 1 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the | nis p | | e) | \$ 14,770.82 |
| | | | (Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate | t als tatis | o o tica | n al | \$ |

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Debtor(s)

_ Case No. _ (If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (1 | Continuation Sneet) | | | | |
|---|----------|---------------------------------------|---|-------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | Assignee or other notification for: | П | | Ħ | |
| Meyer & Njus 1100 U.S. Bank Plaza 200 South Sixth St Minneapolis, MN 55402 | | | GE Money Bank | | | | |
| ACCOUNT NO. 4663-0400-0331-9817 | | J | 5179930000060345 | | | | |
| Household Bank PO Box 80084 Henderson, NV 89015 | | | 5407915006364555 | | | | 7,738.34 |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | 1,100.01 |
| Blatt, Hasenmiller, Leibsker & Moore LLC 125 South Wacker Dr Suite 400 Chicago, IL 60606-4440 | | | Household Bank | | | | |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | |
| The Palmer Firm P.C. Po Box 1600 Rancho Cucamonga, CA 91729-1600 | | | Household Bank | | | | |
| ACCOUNT NO. 300036 | Х | J | | | | | |
| Liqui Debt Systems 29W170 Butterfield Rd. Suite 102 Warrenville, IL 60555 | | | | | | | 4,550.79 |
| ACCOUNT NO. 26-707BNC-CU | | J | "homeowners association dues" | | | | 4,550.79 |
| Painted Lakes 4 ACM Po Box 479 Itasca, IL 60143 | | | | | | | 2,467.00 |
| ACCOUNT NO. | | J | "homeowners association dues" | \vdash | | \dashv | 2,707.00 |
| PLMHOA PO BOX 1260 Lake Villa, IL 60046 | | | | | | | |
| Sheet no. 2 of 4 continuation sheets attached to | | | | C,.1. | tot | Ц | 375.00 |
| Sheet no. 2 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the | | age |) | \$ 15,131.13 |
| | | | (Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate | als atis | tica | n al | \$ |

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IN RE Burns, Paul G & Burns, Darlene

Debtor(s)

Case No. _

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | ((| Continuation Sheet) | | | | | |
|--|----------|---------------------------------------|--|------------|-------------------------|-------------------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | TINLIOUIDATED | dar range | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. Prism Management Group PO Box 1260 Lake Villa, IL 60046-1260 | | | Assignee or other notification for: PLMHOA | | | | | |
| ACCOUNT NO. 0010772412 United Bank Card Financial Deptment Po Box 4006 Clinton, NJ 08809 | х | J | | | | | | 129 50 |
| ACCOUNT NO. 4185-8108-8300-9749 Washington Mutual P.O. Box 660443 Dallas, TX 75266 | X | J | | | | | | 128.50 |
| ACCOUNT NO. NCO Financial Systems P.O. Box 15456 Wilmington, DE 19850-5456 | | | Assignee or other notification for: Washington Mutual | | | | | 5,707.20 |
| ACCOUNT NO. 4185-8616-5638-8398 Washington Mutual P.O. Box 9180 Pleasanton, CA 94566 | | J | 4185861211723428 | | | | | |
| ACCOUNT NO. NCO Financial Systems P.O. Box 15456 Wilmington, DE 19850-5456 | | | Assignee or other notification for: Washington Mutual | | | | | 13,842.38 |
| ACCOUNT NO. The Palmer Firm P.C. Po Box 1600 Rancho Cucamonga, CA 91729-1600 | | | Assignee or other notification for: Washington Mutual | | | | | |
| Sheet no 3 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of (Use only on last page of the completed Schedule F. Rep the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Rela | ort als | pag To so stic | ge) tal on cal | \$ | 19,678.08 |

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IN RE Burns, Paul G & Burns, Darlene

Debtor(s)

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SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | - (| Continuation Sheet) | | | | |
|--|----------|---------------------------------------|--|------------|--------------|---------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | J | | | | | |
| Wells Fargo Po Box 5296 Carol Stream, IL 60197-5296 | | | | | | | 0.00 |
| ACCOUNT NO. | | | Assignee or other notification for: | T | | П | |
| Pierce & Associates Thirteenth Floor 1 N. Dearborn Chicago, IL 60602 | | | Wells Fargo | | | | |
| ACCOUNT NO. | | | Assignee or other notification for: | T | | Н | |
| US HUD Bankruptcy Dept 451 &Th Street SW Washington, DC 20410 | | | Wells Fargo | | | | |
| ACCOUNT NO. WESTAONEM6 | х | J | | | | | |
| Yellow Book USA Collection Dept 2560 Renaissance Blvd King Of Prussia, PA 19406 | | | | | | | 1,331.93 |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | , |
| Yellow Book Customer Service Po Box 3162 Cedar Rapids, IA 52406-3162 | | | Yellow Book USA | | | | |
| ACCOUNT NO. | Х | J | | ╁ | | Н | |
| Yellow Page Publications 777 West Flagler Dr. #800 West Tower West Palm Beach, FL 33401 | | | | | | | |
| | _ | | | _ | | Щ | 457.54 |
| ACCOUNT NO. | | | | | | | |
| Sheet no. 4 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claim | | | (Total of t | Sub | | | \$ 1,7 89.4 7 |
| Schedule of Cleditors Holding Obsecured Nonpriority Claim | | | (Total of the Completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate | t als | Fota so o | al m al | \$ 59,272.40 |

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Case No.

Debtor(s)

(If known)

Desc Main

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

| DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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(If known)

IN RE Burns, Paul G & Burns, Darlene

Case No.

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| Check this box if debtor has no codebtors. | |
|--|--|
| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
| Burns Door & Opener Inc. | United Bank Card Financial Deptment Po Box 4006 Clinton, NJ 08809 |
| | Yellow Book USA Collection Dept 2560 Renaissance Blvd King Of Prussia, PA 19406 |
| | Liqui Debt Systems 29W170 Butterfield Rd. Suite 102 Warrenville, IL 60555 |
| | Capital One P.O. Box 30285 Salt Lake City, UT 84130-0285 |
| | Washington Mutual P.O. Box 660443 Dallas, TX 75266 |
| | Yellow Page Publications 777 West Flagler Dr. #800 West Tower West Palm Beach, FL 33401 |
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(If known)

IN RE Burns, Paul G & Burns, Darlene

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Case No.

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

| Debtor's Marital Status | DEPENDENTS OF | F DEBTOR AND | SPOUSI | E | | |
|--|---|--|----------------|--------|----------------|---------------------------|
| Married | RELATIONSHIP(S): | | | | AGE(S | 5): |
| EMPLOYMENT: | DEBTOR | | | SPOUSE | | |
| Occupation Name of Employer How long employed Address of Employer | 16 y 132 | ukegan Hosp years 24 Sheridan R ukegan, IL 60 | d | rp. | | |
| 1. Current monthly gross wages, | e or projected monthly income at time case filed), salary, and commissions (prorate if not paid mon | thly) | \$ | DEBTOR | \$ | SPOUSE 5,562.73 |
| 2. Estimated monthly overtime | | ľ | \$ | | <u>\$</u> | F F00 70 |
| 3. SUBTOTAL 4. LESS PAYROLL DEDUCTI | ONS | | <u> </u> | 0.00 | <u> </u> | 5,562.73 |
| a. Payroll taxes and Social Secb. Insurance | | | \$ \$ | | \$ | 1,171.66 |
| c. Union dues | dula Attachad | | \$ | | \$ | 727.60 |
| d. Other (specify) See Sche | dule Attached | | \$ | | \$ | 737.62 |
| 5. SUBTOTAL OF PAYROLI | L DEDUCTIONS | | \$ | 0.00 | \$ | 1,909.28 |
| 6. TOTAL NET MONTHLY | TAKE HOME PAY | | \$ | 0.00 | \$ | 3,653.45 |
| 8. Income from real property9. Interest and dividends | on of business or profession or farm (attach detaile | | \$ \$ \$ | | \$ \$ \$ | |
| 10. Alimony, maintenance or surthat of dependents listed above 11. Social Security or other gove | pport payments payable to the debtor for the debtor ernment assistance | or's use or | \$ | | \$ | |
| | | | \$ | | \$ | |
| 12. Pension or retirement incom | e | | \$ | | \$ | |
| 13. Other monthly income | | | Ψ | | ч | |
| (Specify) Income From Daug | yhter | | \$ | 701.69 | \$ | |
| | | | \$ \$ | | \$ | |
| 14. SUBTOTAL OF LINES 7 | THROUGH 13 | | \$ | 701.69 | \$ | |
| 15. AVERAGE MONTHLY I | NCOME (Add amounts shown on lines 6 and 14) | | \$ | 701.69 | | 3,653.45 |
| 16. COMBINED AVERAGE If there is only one debtor repeat | MONTHLY INCOME: (Combine column totals total reported on line 15) | from line 15; | | \$ | 4,355 | 5.14 |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None**

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Debtor(s)

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SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Continuation Sheet - Page 1 of 1

| | DEBTOR | SPOUSE |
|---------------------------|--------|--------|
| Other Payroll Deductions: | | |
| Chs Medical Plan | | 110.65 |
| Chs Dental Plan | | 38.22 |
| Vol Supp Life | | 76.61 |
| Vol Dep Life - Spouse | | 6.80 |
| 401K Loan Payments | | 7.37 |
| Short Term Dis | | 49.03 |
| 401K Pension | | 307.13 |
| Chs Vision Plan | | 10.75 |
| Taxable Gifts | | 2.32 |
| Vol Supp 41.25 | | 6.39 |
| 401K Loan Repayments | | 95.85 |
| 40k Pension | | 26.50 |

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Debtor(s)

_ Case No. __

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

| | (5) | |
|---|--------------------------------|--------------------------------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the de on Form22A or 22C. | e any payment ductions from | s made biweekly, n income allowed |
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete expenditures labeled "Spouse." | e a separato | e schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 1,200.00 |
| a. Are real estate taxes included? Yes No ✓ | Ψ | -, |
| b. Is property insurance included? Yes No | | |
| 2. Utilities: | | |
| a. Electricity and heating fuel | \$ | 200.00 |
| b. Water and sewer | \$ — | |
| c. Telephone | \$ | |
| d. Other Comcast (Tv, Phone, Internet) | \$ —— | 200.00 |
| Cell Phone | \$ | 200.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 25.00 |
| 4. Food | \$ — | 700.00 |
| 5. Clothing | \$ —— | 200.00 |
| 6. Laundry and dry cleaning | \$ — | 50.00 |
| 7. Medical and dental expenses | \$ —— | 200.00 |
| 8. Transportation (not including car payments) | \$ —— | 400.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | Ψ | 100.00 |
| 10. Charitable contributions | Ψ —— | 100.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | Ψ | |
| a. Homeowner's or renter's | \$ | |
| b. Life | φ | |
| c. Health | φ | |
| d. Auto | φ —— | 133.00 |
| | Φ | 133.00 |
| e. Other | — • — | |
| 12 T (| — » — | |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | ¢ | |
| (Specify) | — • — | |
| 12 Installment assuments (in about a 11-12 and 12 areas do not list assuments to be included in the alon) | • | |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) a. Auto | ¢ | 353.00 |
| b. Other 2nd Auto | \$ | |
| b. Other 2nd Auto | — \$ — | 337.00 |
| 14. A1' | \$ | |
| 14. Alimony, maintenance, and support paid to others | \$ | |
| 15. Payments for support of additional dependents not living at your home | \$ | |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | |
| 17. Other | \$ | |
| | \$ | |
| | \$ | |
| 10 AVED 4 OF MONOVI V EVENTORIO (F. 11) | | |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if | | 4 000 00 |
| applicable, on the Statistical Summary of Certain Liabilities and Related Data. | \$ | 4,298.00 |
| | | |
| 19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of | of this docu | ment: |
| None | | |
| | | |
| | | |
| | | |
| | | |
| 20. STATEMENT OF MONTHLY NET INCOME | | |
| a. Average monthly income from Line 15 of Schedule I | \$ | 4,355.14 |
| b. Average monthly expenses from Line 18 above | \$ | 4,298.00 |
| c. Monthly net income (a. minus b.) | \$ | 57.14 |

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Debtor(s)

Case No.

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **19** sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: January 27, 2009 Signature: /s/ Paul G Burns Debtor **Paul G Burns** Date: January 27, 2009 Signature: /s/ Darlene Burns (Joint Debtor, if any) **Darlene Burns** [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP I, the (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of ______ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Signature:

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Document Page 34 of 43 **United States Bankruptcy Court**

Northern District of Illinois

| IN RE: | Case No |
|--------------------------------|-----------|
| Burns, Paul G & Burns, Darlene | Chapter 7 |
| Debtor(s) | |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE 110,162.00 2006 77,414.00 2007 65,925.00 2008

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

-1,929.00 2006 - Burns Door & Opener

-6,914.00 2007 - Burns Door & Opener

0.00 2008 - Burns Door & Opener

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|---------------|---|---|---|---|---|---|--|
| | yments to creditors plete a. or b., as appropriate, an | d c. | | | | | |
| None | a. Individual or joint debtor(s) debts to any creditor made with constitutes or is affected by suc a domestic support obligation counseling agency. (Married depetition is filed, unless the spot | nin 90 days immeh transfer is less or as part of a bottors filing und | mediately preceding the ss than \$600. Indicate an alternative repayment der chapter 12 or chapt | e commencement with an asterisk (* ent schedule unde er 13 must include | of this case unless the aggreen any payments that were not a plan by an approved : | regate value nade to a cre nonprofit bu | of all property that ditor on account of adgeting and credit |
| Well: P.O. | IE AND ADDRESS OF CREDI' s Fargo Box 10347 Moines, IA 50306 | TOR | DATES OF F 3 payments | PAYMENTS of \$353/mo | A | MOUNT PAID 0.00 | AMOUNT STILL OWING 0.00 |
| PO E | C nent Center Box 17313 more, MD 21297-1313 | | 3 payments | of \$337/mo | | 0.00 | 0.00 |
| None | b. Debtor whose debts are not preceding the commencement \$5,475. If the debtor is an indiobligation or as part of an altern debtors filing under chapter 12 is filed, unless the spouses are | of the case unly vidual, indicate ative repayment or chapter 13 is | ess the aggregate value with an asterisk (*) aut schedule under a plar must include payments | e of all property the ny payments that we by an approved no and other transfer | nat constitutes or is affect were made to a creditor on onprofit budgeting and cred | ed by such to account of dit counselin | ransfer is less than a domestic support ag agency. (Married |
| None | c. All debtors: List all paymen who are or were insiders. (Mara joint petition is filed, unless t | ried debtors fili | ng under chapter 12 or | chapter 13 must i | nclude payments by either | | |
| 4. Su | its and administrative proceed | ings, execution | ns, garnishments and | attachments | | | |
| None | a. List all suits and administrat bankruptcy case. (Married debr not a joint petition is filed, unle | tors filing unde | r chapter 12 or chapter | 13 must include | nformation concerning eit | | |
| AND Well: | TION OF SUIT CASE NUMBER s Fargo Bank v. Burns, H1339 | NATURE O | of PROCEEDING e | COURT OR AND LOCA | | STATUS DISPOSIT Sold at s | ΓΙΟΝ |
| None | b. Describe all property that ha the commencement of this case or both spouses whether or not | e. (Married deb | tors filing under chapt | er 12 or chapter 1 | 3 must include informatio | n concerning | |
| 5. Re | possessions, foreclosures and r | eturns | | | | | |
| None | List all property that has been r the seller, within one year imminclude information concerning joint petition is not filed.) | nediately prece | ding the commenceme | nt of this case. (M | arried debtors filing unde | r chapter 12 | or chapter 13 must |
| | IE AND ADDRESS OF CREDI' s Fargo | TOR OR SELI | FORECLOSU | OR RETURN | DESCRIPTION AND VOF PROPERTY 707 Benton Ct. Lake Villa, IL 60046 | VALUE | |

6. Assignments and receiverships

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None a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

Sold at forclosure sale

| | Document Page 36 of 43 | |
|--|--|---|
| | do of a systadion massisses ' ' | |
| | filing under chapter 12 or chapter 13 must inc | ted official within one year immediately preceding the clude information concerning property of either or both nt petition is not filed.) |
| | | |
| its to family members aggregating less than recipient. (Married debtors filing under cl | \$200 in value per individual family member anapter 12 or chapter 13 must include gifts or | and charitable contributions aggregating less than \$100 |
| | | |
| mmencement of this case. (Married debtor | rs filing under chapter 12 or chapter 13 must | |
| ents related to debt counseling or bankru | ptcy | |
| nsolidation, relief under bankruptcy law or | | |
| dlas orth Corporate Circle | DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBT | |
| r transfers | | |
| solutely or as security within two years in apter 13 must include transfers by either or | nmediately preceding the commencement of | this case. (Married debtors filing under chapter 12 or |
| ONSHIP TO DEBTOR | DATE November 7, 2008 | DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED 707 Benton Ct. Lake Villa, IL 60046 Forclosure Sale \$235051.00 |
| effective state of the state of | st all gifts or charitable contributions made fits to family members aggregating less than or recipient. (Married debtors filing under cl joint petition is filed, unless the spouses are s s st all losses from fire, theft, other casualty ommencement of this case. (Married debtor joint petition is filed, unless the spouses are ents related to debt counseling or bankru st all payments made or property transferred onsolidation, relief under bankruptcy law or this case. AND ADDRESS OF PAYEE ldlas orth Corporate Circle like, IL 60030 or transfers List all other property, other than property is solutely or as security within two years in | st all losses from fire, theft, other casualty or gambling within one year immediately prommencement of this case. (Married debtors filing under chapter 12 or chapter 13 must joint petition is filed, unless the spouses are separated and a joint petition is not filed.) The property transferred by or on behalf of the debtor to any persons insolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within this case. DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AND ADDRESS OF PAYEE PAYOR IF OTHER THAN DEBTOR AND ADDRESS OF TRANSFEREE, ONSHIP TO DEBTOR DATE |

11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION **First American**

TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE Checking Account, for Burns door AMOUNT AND DATE OF SALE OR CLOSING \$20.00 balance, closed July 2008

and opener Inc.

12. Safe deposit boxes

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List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

707 Benton CT.

Lake Villa, IL

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED

2400 Samson Way #2C

Waukegan, IL

Nov 3, 1999 to Nov 1, 2008

DATES OF OCCUPANCY

Nov 1, 2008 to present

16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

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Document LAST FOUR DIGITS

OF SOCIAL-SECURITY OR OTHER INDIVIDUAL

TAXPAYER-I.D. NO. (ITIN)/COMPLETE EIN ADDRESS

NATURE OF BUSINESS Garage door BEGINNING AND ENDING DATES

Jan 2006 to July 2008

Desc Main

| NAME | | | | |
|-------|------|---|--------|------|
| Burns | Door | & | Opener | Inc. |

| None | b. Identify any business listed in response to subdivision a., above, that is | "single asset real estate" | as defined in 11 U.S.C. § 101. |
|--------------|---|----------------------------|--------------------------------|
| \checkmark | | C | v |

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Signature /s/ Paul G Burns of Debtor | Paul G Burns |
|--------------------------------------|--|
| Signature /s/ Darlene Burns | |
| of Joint Debtor | Darlene Burns |
| (if any) | |
| (if any) | |
| | of Debtor Signature /s/ Darlene Burns of Joint Debtor |

_____**0** continuation pages attached

 $Penalty for making \ a false \ statement: Fine \ of \ up \ to \ \$500,000 \ or \ imprisonment \ for \ up \ to \ 5 \ years \ or \ both. \ 18 \ U.S.C. \ \$ \ 152 \ and \ 3571.$

Case 09-02339 **B8** (Official Form 8) (12/08)

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United States Bankruptcy Court

Northern District of Illinois

| IN RE: Burns, Paul G & Burns, Darlene | | | Case No. |
|---|-------------------------------|---|--|
| | | Chapter 7 | |
| | Debtor(s) | | - |
| CHAPTER 7 I | NDIVIDUAL DEBTOR | R'S STATEME | ENT OF INTENTION |
| PART A – Debts secured by property of estate. Attach additional pages if necessa | | ully completed fo | or EACH debt which is secured by property of the |
| Property No. 1 | | | |
| Creditor's Name: HSBC | | Describe Property Securing Debt: 2004 Ford F150 pickup | |
| Property will be (check one): ☐ Surrendered ✓ Retained | | | |
| If retaining the property, I intend to (che ✓ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain | eck at least one): | (fo | or example, avoid lien using 11 U.S.C. § 522(f)). |
| Property is (check one): ☐ Claimed as exempt ✓ Not claime | ed as exempt | | |
| Property No. 2 (if necessary) | | | |
| Creditor's Name: Wells Fargo Auto Finance | | Describe Property Securing Debt: 2003 Dodge Intrepid | |
| Property will be (check one): ☐ Surrendered | | | |
| If retaining the property, I intend to (che ✓ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain | | (fo | or example, avoid lien using 11 U.S.C. § 522(f)). |
| Property is (check one): ☐ Claimed as exempt ✓ Not claime | ed as exempt | | |
| PART B – Personal property subject to un additional pages if necessary.) | expired leases. (All three co | lumns of Part B n | nust be completed for each unexpired lease. Attach |
| Property No. 1 | | | |
| Lessor's Name: | Describe Leased Pa | roperty: | Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ Yes ☐ No |
| Property No. 2 (if necessary) | | | |
| Lessor's Name: | Describe Leased Property: | | Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ Yes ☐ No |
| continuation sheets attached (if any) | , | | |
| I declare under penalty of perjury that personal property subject to an unexpi | | tention as to an | y property of my estate securing a debt and/or |

Signature of Debtor /s/ Darlene Burns Signature of Joint Debtor

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IN RE:

Burns, Paul G & Burns, Darlene

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors _____30

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: January 27, 2009

/s/ Paul G Burns
Debtor

/s/ Darlene Burns

Joint Debtor

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Burns, Paul G 2400 N. Samsong Way #2c Waukegan, IL 60087 Document Page 41 of 43 Capital One
P.O. Box 30281
Salt Lake City, UT 84130

Pierce & Associates Thirteenth Floor 1 N. Dearborn Chicago, IL 60602

Burns, Darlene 2400 N. Samsong Way #2c Waukegan, IL 60087 Chase P.O. Box 15298 Wilmington, DE 19850-5298 PLMHOA PO BOX 1260 Lake Villa, IL 60046

Law Office of Paul R. Idlas 1099 N. Corporate Cir. Grayslake, IL 60030

GE Money Bank P.O. Box 981127 El Paso, TX 79998-1127 Prism Management Group PO Box 1260 Lake Villa, IL 60046-1260

Access One 820 Jackson Blvd., 6th Floor Chicago, IL 60607 Household Bank PO Box 80084 Henderson, NV 89015

Po Box 1600 Rancho Cucamonga, CA 91729-1600

AT&T PO Box 8100 Aurora, IL 60507 HSBC Po Box 17904 San Diego, CA 92177 United Bank Card Financial Deptment Po Box 4006 Clinton, NJ 08809

The Palmer Firm P.C.

Barclays Bank Delaware 125 S West St Wilmington, DE 19801 LHR Inc 56 Main St Hamburg, NY 14075 US HUD Bankruptcy Dept 451 &Th Street SW Washington, DC 20410

Blatt, Hasenmiller, Leibsker & Moore LLC 125 South Wacker Dr Suite 400 Chicago, IL 60606-4440

Liqui Debt Systems 29W170 Butterfield Rd. Suite 102 Warrenville, IL 60555 Washington Mutual P.O. Box 660443 Dallas, TX 75266

NCO Financial Systems P.O. Box 15456 Wilmington, DE 19850-5456 Meyer & Njus 1100 U.S. Bank Plaza 200 South Sixth St Minneapolis, MN 55402 Washington Mutual P.O. Box 9180 Pleasanton, CA 94566

Capital One P.O. Box 30285 Salt Lake City, UT 84130-0285 NCO Financial Systems P.O. Box 15456 Wilmington, DE 19850-5456 Wells Fargo Po Box 5296 Carol Stream, IL 60197-5296

Capital One P.O. Box 70886 Charlotte, NC 28272-9903 Painted Lakes 4 ACM Po Box 479 Itasca, IL 60143 Wells Fargo Auto Finance PO Box 29704 Phonenix, AZ 85038-9704 Case 09-02339 Doc 1 Filed 01/27/09 Entered 01/27/09 11:55:49 Desc Main Document Page 42 of 43

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| IN RE: | | | Case No | | | |
|--------|--|---|--|--|--|--|
| Вι | urns, Paul G & Burns, Darlene | | Chapter 7 | | | |
| | Debtor(s |) | | | | |
| | DISCLOSURE OF (| COMPENSATION OF ATTORNEY | Y FOR DEBTOR | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | |
| | For legal services, I have agreed to accept | | \$\$,386.00 | | | |
| | Prior to the filing of this statement I have received | | \$\$, | | | |
| | Balance Due | | \$\$ | | | |
| 2. | The source of the compensation paid to me was: | ebtor Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | ebtor Other (specify): | | | | |
| 4. | I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | |
| | I have agreed to share the above-disclosed compens together with a list of the names of the people sharing | | or associates of my law firm. A copy of the agreement, | | | |
| 5. | In return for the above-disclosed fee, I have agreed to ren | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | |
| | b. Preparation and filing of any petition, schedules, sta | tors and confirmation hearing, and any adjourned hea | • | | | |
| 6. | By agreement with the debtor(s), the above disclosed fee | does not include the following services: | | | | |
| | | | | | | |
| | I certify that the foregoing is a complete statement of any agoroceeding. | CERTIFICATION greement or arrangement for payment to me for repre | sentation of the debtor(s) in this bankruptcy | | | |
| | January 27, 2009 | /s/ Paul R. Idlas | | | | |
| | Date | Paul R. Idlas Law Office of Paul R. Idlas 1099 N. Corporate Cir. Grayslake, IL 60030 | | | | |